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August 12, 1996

SETH v.d.H. COOLEY  
DIRECT DIAL: (215) 979-1838

*FOR SETTLEMENT PURPOSES ONLY*

VIA FACSIMILE and FIRST-CLASS MAIL

Damaris Cristiano  
Assistant Regional Counsel  
United States Environmental Protection Agency  
Region II  
290 Broadway  
New York, NY 10007

RECEIVED  
AUG 14 1996

**Re: SCP Carlstadt Superfund Site**  
**De Minimis Settlement**

Dear Ms. Cristiano:

This letter shall serve to inform you of the interest of The Gilbert Spruance Company ("Spruance") in participating in the *de minimis* settlement in this matter.

The volume attributed to Spruance by EPA is 10,000 gallons. This volume is incorrect. The actual volume of Spruance material which was the subject of transactions with Scientific Chemical Processing is 9,461 gallons. This is the sum of one 5,000 gallon load on May 8, 1979, and one 4,461 gallon load on March 21, 1979. Although the NJDEP Special Waste Manifest relating to the March 21, 1979 load refers to "APPROX. 500 Gals.," Spruance's internal records reflect the exact volume of 4,461 gallons. See attached documents.

598848



Damaris Cristiano, Esquire  
August 12, 1996  
Page 2

Please confirm in writing that the volume figure to be used for Spruance is 9,461 gallons.

Sincerely,

A handwritten signature in black ink, appearing to read 'SvdHC', with a long, sweeping flourish extending to the right.

Seth v.d.H. Cooley  
for DUANE, MORRIS & HECKSCHER

SvdHC:jes  
cc (w/enc.): Elizabeth Yu, Esquire  
Mr. Richard Puvogel  
Sara Beth Watson, Esquire (fax)

PH2\132234.1

DEPARTMENT OF ENVIRONMENTAL PROTECTION  
SOLID WASTE ADMINISTRATION

A

SPECIAL WASTE MANIFEST

A 406

SECTION I TO BE COMPLETED BY THE SPECIAL WASTE GENERATOR

Plant Identification Number: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
 Pick-Up Date: 03/23/79  
 Company Name: Oil Spill Spruance Co.  
 Pick-Up Address: 1300 N. 13th & Tioga Streets Philadelphia Pa.  
 Name of Hauler: P Address: Newark, N.J.  
 Name of Facility: SCP Address: Newark, N.J.  
 Emergency Spill Phone Nos.: 609-292-5560 or 609-292-7172

Handling Instructions

Waste Type	Number of Containers	Physical State	Hazard ID	Total Quantity Identify units in pounds or gallons use P for pounds and G for gallons	Pounds or Gallons	SECTION II TO BE COMPLETED BY THE SPECIAL WASTE OPERATOR
						Rejected Amount
1 Acid Solution						
2 Alkaline Solution						
3 Arsenic Residues						
4 Catalyst Residues						
5 Cyanide Residues						
6 Chlorinated (Dioxin, Furans)						
7 Etching, Pickling, & Plating						
8 Explosive Residue						
9 Filter Clays, Filter Asks						
10 Ester, Alcohol, Ether, Ketone, Glycol Residues						
11 Heavy Metal Residue						
12 Organic and Heavy Metal Residue Mixture						
13 Latex Residue						
14 Peroxide						
15 Oil and Oil Slud (Excl. Fuel)						
16 Paint and Pigment Residue				1 L F APPROX 6,000 GALS. G		
17 Pesticides						
18 Pharmaceutical Wastes						
19 Lacrators, Amine, Varnishes						
20 Plasticizer, Resin, Monomers, Elastomer Residues						
21 PCB, PBB Contaminated						
22 Solvent, Halogenated Organic						
23 Solvent, Mixed						
24 Still Bottoms						
25 Radioactive Residue						
26 Tetraethyl Lead Residue						
27 Other (See Instructions)						
28						
29						
30						

I certify that the above is correct to the best of my knowledge and Title Charles E. Robinson Purchasing Agent

I certify that the description of material(s) listed in Section I was accepted by me. Date 3-21-79 Signature [Signature]

Name of Hauler [Signature]  
I certify that the description of material(s) listed in Section I was accepted by me to the Special Waste Facility. Date 3-21-79 Signature [Signature]

Name of Facility [Signature]  
Registration Number [Signature]  
I certify that the hauler delivered the waste described in Section I to this Facility. Date [Signature]

I certify that the description of material(s) listed in Section I was accepted by me. Date 3-21-79 Signature [Signature]

Name of Hauler [Signature]  
I certify that the description of material(s) listed in Section I was accepted by me to the Special Waste Facility. Date 3-21-79 Signature [Signature]

Name of Facility [Signature]  
Registration Number [Signature]  
I certify that the hauler delivered the waste described in Section I to this Facility. Date 3-21-79 Signature [Signature]

DEPARTMENT OF ENVIRONMENTAL PROTECTION  
SOLID WASTE ADMINISTRATION

SPECIAL WASTE MANIFEST

A 41587

**SECTION I TO BE COMPLETED BY THE SPECIAL WASTE GENERATOR**

Plant Identification Number: \_\_\_\_\_  
 Company Name: Oilbert S. Finance Co.  
 Pick Up Address: Richmond & Tioga St. Philadelphia, Pa.  
 Name of Hauler: SCP Address: Newark, N.J.  
 Name of Facility: SCP Address: Newark, N.J.  
 Emergency Spill Phone Nos.: 609-292-3560 or 609-292-1172

Pick Up Date: 05 08 79  
 MO DAY VR

Handling Instructions: \_\_\_\_\_

Waste Type	Number of Containers	Physical State	Hazard ID	Total Quantity		Pounds or Gallons Received
				Identify units in pounds or gallons use P for pounds and G for gallons		
1 Acid Solution						
2 Alkaline Solution						
3 Arsenic Residues						
4 Catalyst Residues						
5 Cyanide Residues						
6 Chlorinated (Dioxin, Furan) Residues						
7 Etching, Pickling, & Plating Residue						
8 Explosive Residue						
9 Filter Clays, Filter Aids						
10 Ester, Alcohol, Ether, Ketone, Glycol Residues						
11 Heavy Metal Residue						
12 Organic and Heavy Metal Residue Mixture						
13 Latex Residue						
14 Peroxide						
15 Oil and Oil Sludges, Emulsion						
16 Paint and Pigment Residues						
17 Powders						
18 Pharmaceutical Wastes (Drugs, etc.)						
19 Lacrimators, Ammonia, Mercaptan, Amines						
20 Plasticizer, Resin, Monomer, Elastomer Residues						
21 PCB/PBB Contaminated Materials						
22 Solvent, Halogenated Organic						
23 Solvent, Mixed						
24 Still Bottoms						
25 Radioactive Residue						
26 Tetraethyl Lead Residues						
27 Other (See Instructions)						
28						
29						
30						

**SECTION V TO BE COMPLETED BY THE SPECIAL WASTE FACILITY OPERATOR**

Received Amount: \_\_\_\_\_

I certify that the above information is correct to the best of my knowledge.  
 Date: 5/2/79 Signature: [Signature] and Title: [Title]

**SECTION II TO BE COMPLETED BY THE SPECIAL WASTE HAULER**

I certify that the described quantity of material(s) listed in Section I was collected by me.  
 Date: 5-8-79 Signature: [Signature] Vehicle License Plate Number: WV 100A30C

**SECTION III TO BE COMPLETED BY THE SPECIAL WASTE HAULER**

Name of Hauler: [Name] Address: [Address]  
 I certify that the described quantity of material(s) listed in Section I was handled by me to the Special Waste Facility.  
 Date: 5/2/79 Signature: [Signature] Vehicle License Plate Number: WV 100A30C

**SECTION IV TO BE COMPLETED BY THE SPECIAL WASTE FACILITY**

Name of Facility: [Name] Address: [Address]  
 Registration Number: [Number]  
 I certify that the hauler stated above delivered the waste described in Section I to this Facility.  
 Date: 5/8  
 Name and Title: [Name and Title]

FRT. RATE (START 1979) WASTE REMOVAL (acct. 606)

DATE	REQ. NO.	FIRM	QUANTITY	GRADE	PRICE	F.O.B.	DATE INV.
3/16/79	3475	Scientific Chemical Processing, Inc.	4461 gals.		.20/gal.		
				DELAY	75.00		
				FRT.	250.00		7/23/79
5/4/79	3636	✓	5,000 gals.		.20 ✓		
				DELAY	50.00		
				FRT.	250.00		5/9/79